

NO. OF COPIES RECEIVED
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form 1-114
Supersedes Old C-104 and C-11
Effective 1-1-85

I. Crown Central Petroleum Corporation
4000 N. Big Spring, Suite 213, Midland, TX 79705
Reason(s) for filing (check proper box) Other (Please explain)
New Well ☐ Change in Transporter oil ☐
Transportation ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Residual Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Christmas Well No. 2 Pool Name, including Formation West Nadine (Blinbry) Kind of Lease State, Federal or Fee
Section A 380 Feet From The North Line 420 Feet From The East
Township 7 Range 20S 38E SW/4 Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter (check ☒ or ☐) Address (Give address to which approved copy of this form is to be sent)
Pride Pipeline Company P.O. Box 2436, Abilene, TX 79604
Name of Authorized Transporter (check ☐ or ☐)
Warren Pet
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 6 Twp. 20S Rse. 38E Is gas actually connected? Yes When 6/85

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.S.T.D.					
Name of Producer's Formation		Top Oil/Gas Pay		Tubing Depth					
Perforations				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours

Date of Test (New Oil from Well Only)	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Duration of Test	Purging Pressure	Drilling Pressure	Choke Size
Actual Prod. during Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF	Duration of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Producing Method (pitot, back pr.)	Purging Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

K.K. Kirby
Petroleum Engineer
November 11, 1986

OIL CONSERVATION COMMISSION

APPROVED NOV 14 1986, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply